Administrative Order 2:05 Division of Mental Health and Addiction Services Community Addendum Closure of Incidents

The purpose of this addendum is to establish policy and procedure specific to the closure of incidents reported by the DMHAS Community providers. The information below provides a hierarchical representation of closure responsibility. This DMHAS Community Addendum is applicable to DMHAS agencies providing Residential or Ambulatory Licensed Services.

When an incident occurs at an agency site or in presence of agency staff providing Residential or Ambulatory Licensed Services, the agency should follow the identified grid shown below for closure.

Special Response Unit

The information below identifies incident types that require direct investigation by the DHS Office of Program Integrity and Accountability (OPIA), Special Response Unit (SRU). SRU is responsible for investigating unusual incidents occurring in Residential programs or Ambulatory Licensed programs for the following categories:

Incident Description	Incident Code	Reporting Level
Abuse (major Injury)	AB 116	A+
Physical Abuse (moderate injury)	AB 114	Α
Sexual Abuse (penetration/genital contact)	AB 420	A+
Sexual Abuse (all other forms of sexual contact)	AB 410	А
Unexpected Death (sudden)	DT 210	A+
Unexpected Death (suicide)	DT 310	A+
Unexpected Death (accidental)	DT 320	A+
Unexpected death	DT330	A+
Unexpected Death (undetermined manner)	DT 410	A+
Exploitation (equal to or above \$100)	EX 135	Α
Neglect (major injury)	NE 216	Α
Neglect (moderate injury)	NE 214	В

Provider agencies are responsible to initiate internal investigations and collect staff and witness statements for abuse, neglect, and exploitation incidents unless directed not to do so by the SRU or a component authorized by statute to conduct investigations (i.e. law enforcement).

Please contact Vince Giardina, Chief, SRU, at 609-292-2102 for questions related to (SRU) investigations.

Please fax all investigations to SRU, at 609-341-2275.

Critical Incident Management Unit

Administrative Reviews of agency investigations are conducted by the DHS OPIA Critical Incident Management Unit (CIMU). CIMU is responsible for the closure of unusual incidents, occurring in Residential programs or Ambulatory Licensed programs for the following categories:

Incident Description	Incident Code	Reporting Level
Physical Abuse (minor injury)	AB 112	В
Physical Abuse (no injury)	AB 110	В
Verbal Abuse	AB 310	В
Exploitation (improper use of SR by staff)	EX 110	Α
Exploitation (below \$100 or undetermined)	EX 145	В
Neglect (minor Injury)	NE 212	В
Neglect (no injury)	NE 211	В

CIMU will review your completed agency investigation for quality assurance purposes and close the incident on behalf of the Department. Please submit your investigations to CIMU at the address and/or e-mail listed below within 45 days of the incident being reported. CIMU staff will complete its review within 30 days of receipt of your report and only advise you of any deficiencies. CIMU will send a letter to notify agencies that an investigation report is overdue and has been open for forty-five (45) days.

Please fax all investigation reports to CIMU; it is not necessary to send these investigation reports to the regional office. However, follow-ups which provide non-closure related information will continue to be sent to the DMHAS Region that has submitted the UIR, and not CIMU.

All completed investigation reports should be faxed at **609-341-2260**. <u>If needed</u>, completed investigation reports requiring additional attachments can be sent to the address below:

Critical Incident Management Unit Department of Human Services 222 South Warren Street, 4th floor P.O Box 700 Trenton, New Jersey 08625

Office of Licensing/Special Operations Unit

The Special Operations Unit (SO) within the OPIA Office of Licensing is responsible for the follow up and closure of unusual incidents, occurring in Residential programs or Ambulatory Licensed programs for the following categories:

Incident Description	Incident Code	Reporting Level
Environmental Incident	OP 310	Α
Fire- Major Event	OP 430	A+
Fire- Moderate Event	OP 420	Α
Fire- Minor Event	OP 410	В
Unexpected Staff Shortages	OP 540	Α
Public Safety Issues	OP 530	A+
Operational Breakdown	OP 510	Α

Provider agencies must provide any follow-up information to the Special Operations unit within 60 days. Please note whether the follow-up is informational or for closure.

Please fax all follow-up reports to SO at 609-341-2256; it is not necessary to send these reports to the regional office.

The Special Operations Unit can be contacted at 609-633-6932.

Division of Mental Health and Addiction Services

The Division of Mental Health and Addiction Services (DMHAS) regional office is responsible for the follow up and closure of unusual incidents occurring in Residential programs or Ambulatory Licensed programs for the following categories:

	Incident Types
Physical Assault	
Sexual Assault	
Criminal	
Death - Expected	
Elopement	
Injury	
Medical	
Operational	
Suicide attempt	

The DMHAS regional office is also responsible for follow-up and closure of all unusual incidents (regardless of the categories) occurring in Ambulatory Non-Licensed or Other Non-Licensed programs.

Department of Human Services Office of Program Integrity and Accountability 10/2013

When incident closure is the responsibility of DMHAS, please assure that the information is forwarded to the appropriate DMHAS regional office.

Submit reports to dmhs.incidentrept@dhs.state.nj.us; a facsimile report will be accepted as a back-up. The regional fax numbers are: Northern Office Fax # 973-977-6024 & Southern Regional Office Fax # 609-341-2316.

Submit all Follow-up Reports in accordance with the timelines outlined in AO 2:05. Please utilize the established incident forms for initial reporting and follow-up reporting, in accordance with DHS and DMHAS policy. When completing the attached incident reports for follow-up, please indicate whether the information contained in the report is informational or can be used for closure. Please be sure to include all information regarding corrective actions taken or projected implementation dates for corrective action.